

Holiday Valley Ultimate Pass Registration 2020-2021

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip/Postal Code _____

Phone _____ Date of Birth _____ Age _____

Email Address* (REQUIRED): _____

*Email address required for electronic Acknowledgement of Risk form. Once purchase is complete you will be emailed a link to sign .

Circle desired pass:	Pre Nov 1st	Post Nov 1st	Circle desired pass:	Pre Nov 1st	Post Nov 1st
Ultimate White Pass	\$272	\$292	Select Monday	\$160	\$170
Ultimate Flex	\$203	\$213	Select Tuesday	\$160	\$170
Ultimate Sunday	\$298	\$318	Select Wednesday	\$160	\$170
Ultimate Sunday _(w/lessons)	\$409	\$429	Select Thursday	\$170	\$180
Ultimate Sunday Jr.	\$202	\$222	Select Friday	\$209	\$219
Ultimate Sunday Jr _(w/lessons)	\$424	\$444	Select Saturday	\$209	\$219
			Select Sunday	\$175	\$185

Attention Skiers and Riders....

Ultimate Pass Information. Please Read Carefully.

1. White Pass, Flex, Sunday and Select Programs receive one free 8 hour lift ticket redeemable any day or night in March or April.
2. From Dec 26, 2020 thru Jan 1, 2021 the White Pass is valid starting at 3:30pm. The Ultimate Sunday is valid Dec 27, 2020, Jan. 17, 2021, Feb.14, 2021 starting at 2:30pm.
3. Programs are non transferrable and cannot be used by another skier. Use by another skier will void the card. Unused programs cannot be transferred to the following season. One lift ticket is issued per day, per skier.
4. Group lessons included in the Select, Flex and White Pass are for ages 8 years and up as of Nov 1, 2020. Group lessons available for ages 7 and up every Sunday at 3:30pm.
5. Lost or stolen cards must be reported to Customer Service. There will be a \$20 replacement fee for lost or stolen cards.

A complete list of all terms is available at: holidayvalley.com/ultimatepasses

Ultimate Pass Payment

Make checks payable to Win-Sum Ski Corp. PO Box 370, Ellicottville, NY 14731-0370 or fax application to 716-699-5204

Credit Card Number _____

Expiration Date _____ CID _____

Signature of Card Holder _____ Date Received _____